HIGH EFFICIENCY HEAT PUMP PROGRAM - APPLICATION FORM

Applications will only be processed if information is provided in all 7 sections and only if the homeowner's and contractor's signatures are on form. Complete 1 form for each residential heat pump installation. Contact Kelly Beiermann (402-563-5415) klbeier@nppd.com, or Roger Hunt (402-293-9406) or Steve Walker (308-535-5324) with any questions.

Can only apply for one: Direct Incentive	-OR- Low Interest Loan	1
1. Name of HVAC Contractor:		
Address & City:		
Phone Number:	Tax ID #:	
Home Owner's Name: Electric Utility:		
Home owner's Address & City:		
Installation Address & City*:	Acct o	r Meter #*
3. Equipment Information: Tonnage:	SEER Rating (14.0 is min):	HSPF (8.2 is min.):
Backup for Heat Pump: Electric, (kw) or Fossil	Fuel (Btuh), if Geothermal Hea	ıt Pump (EER)* (COP)*
Equipment Mfr.:	Furnace Model No.:	
ID Coil No.: Heat Pump) Model No.:	ARI Perf. Cert. #*
Type of Installation: New Construction, A/C to a	a Heat Pump, or Existing Heat	Pump to New Heat Pump
4. Determine CFM: (Complete section A or B)		
A) Total External Static Pressure in	inches of W.C.	
Equivalent CFM (per equipment specific	cations and associated external static pres	sure)
B) Airflow check – temperature rise method with electric	furnace (test in emergency heat mode)	
1) Volts x Amp	ps = Watts	
2) Watts x 3.414 =		
3)Supply Air °F (minus)		Temp. Difference (TD) °F
4) Btuh (divided by) 1.08 (divided b		
5. Measured Heat Pump Capacity Calculation (Complete		
A) Heating cycle (test in heat pump only mode)	- '	
1) Supply Air °F (minus)	Return Air °F =	(TD) °F
2) 1.08 x (TD) °F x		
B) Cooling Cycle (run at least ten minutes)	, ,	
Return – wet bulb temp.	= Enthalpy	
2) Supply – wet bulb temp.		
3) Enthalpy Difference =		
4) 4.5 x CFM (section 4) x	Enthalpy Difference =	Btuh
6. Quality Assurance Inspection Results:		
A) Measured Total CFM (section 4):	Outdoor Temp : Mfr'	's. Rated HP Capacity: Btuh
B) Measured Heat Pump Capacity (section 5):		o. Nation III. Capasity.
Difference between rated and measured capacity (rate).		% Passed (within 10%) or Failed
D) If failed - reason		
7. I acknowledge that this installation is in compliance w		··································
7. I acknowledge that this installation is in compliance v	vitil the program guidennes.	
Homeowner:Print Name	Signature	Date
	Signature	Date
Inspection Performed by:		
Print Name	Signature	Date
NATE Certification #*:		All 7 sections need to be completed in order to process